CENTRAL FAX CENTER

JUL 2 8 2005

P. 01

Fax

Ell Lilly and Company Lilly Corporate Centre Indianapolis, Indiana 46285 U.S.A.

Legal - Patent Department

To:

USPTO

Fax:

571-273-8300

Date:

From:

Eli Lilly and Company

Fax:

317-276-3861

Subject:

Application No. 10/613619

Total Pages:

Documents:

Reply under 37 C.F.R. 1.111 Terminal Disclaimer Extension for Reply within 1 month

CONFIDENTIALITY NOTICE: This facsimile message from Eli Lilly and Company (including all attachments) is for the sole use of the intended recipient(s) and may contain confidential and privileged information. Any unauthorized review, use, disclosure, copying or distribution is strictly prohibited. If you are not the intended recipient, please contact the sender by reply facsimile and destroy all copies of the original message.

RECEIVED CENTRAL FAX CENTER

Please type a plus sign (+)	inside this box →	+				JU	1 2 8 2005	
			Complete if Known					
FEE TRANSMITTAL						10/613619		
			ion Date		July 3, 2003			
		US Nat'l	Entry Da	te				
		(if appl						
Effective December 8, 2004 TOTAL AMOUNT OF PAYMENT (\$)120.00			med Inver	ALLEN Douglas J				
			01049 1774			м		
			Examiner Name SPEAR, JAMES M Conf. No. 4376					
			Attorney Docket Number X11666C					
METHOD OF PAYMENT (check one)		FRE CALCULATION (continued) 3. ADDITIONAL FEES						
				FEES				
The Commissioner is bereby authorised to Charge indicated fees and credit any overpayments to:			Large Entity	P	ee Description	•	Fee Paid	
			Ree (\$)		_			
Donadt -			130	Surcharoe-1=	te Filing foe or ca	. t h [
Deposit 05-0840			730					
Munber			1052 50 Surcharge-late provisional filing fee or cover sheet.					
Pocount FIT HITTY and COMPany								
Mame Charge Any Additional Ree	1053	130	Non-English	epecification	ļ			
A Additional Fee Required			•					
FEE CALCU	1251	120		x reply within fire		120.00		
	1252	450	Extension fo	r reply within seco	and mouth			
1. In connection wit	h the filing, search	1253	1,020	Extension fo	reply within thir	od month		
and exam fees								
Code Description	Fee Fee Faid	1254	1,590	Extension fo	r reply within four	th wonth		
1011 Basic filing fee	\$300.00	1255	2,160	Extension fo	r reply within fift	h wonth		
(Utility)	\$500.00	1401	500	Notice of My	peal			
. "						1		
1311 Utility examination \$200.00 fee		1402	500	•	ef in support of an	r ebhegr		
SUBTOTAL (1) (\$)0.00		1452	- 500	Pebition to	revive-unavoidable			
		1453	1,500	Petition to	revive-unintentions	il		
		1502	1,400	Utility issu	g fee (or reissus)			
					the Commissioner			
	•	132	130					
Code Total claims	Extra Fee Paid (\$)	1801	790	Request for	Continued Examinats	(RCB)		
1202 20 =	X 50 = \$	Ot	ber fee (8	pecify)				
		1						
						•		
,								
Independent			her fee (s	pecify)			1	
claims							<u> </u>	
4004	v 000							
1201 3 =	X 200 = \$							
Multiple	Yes	Ot:	her fee (s	pecify)				
1203 Dependent	or 360 = \$							
Claim	No (if yes)							
				,,_,,		- _~		
Claims and Excess Length Fees			her fee (s	specify)		•		
1081 Total length (spec + drawings)								
100 = excess pages								
	\$						1	
No extra charge for first 100 pages. Must pay								
\$250 for each adtl 50 pages (or fraction thereof).								
			·			<u> · · · · · · · · · · · · · · · · · · </u>		
SUET				SUBTOTAL (3	3)	(\$)120.00		
SUBHITTED BY	l	··		Complete (if	applicabl	<u> </u>		
SUPPLY THE ST				1-12-0-0 (41	-E4-04-04-04			
Typed or Nelsen L. Lemtz		Reg. Number 38,537						
Printed Name	-			Date				
Signature	4.11			i	10	1281	65	
PAGE 6/6 * RCVD AT 7/28/2005 4:18:43 P	DTA EEVDE 4	/26 ፥ ሕህነው - ኅን	(20200 t 6615-24					
FASE UV. NOTEMI 1120/2003 4. 10.43 P	IN IEGSICITI MONITUIT TIIIKEL " SAK:US	┌╽ ∁ ╩ <mark>С</mark> Г⋏ҞГҹ҈	17. CIND DC	39300 . r2lh;?J	1 211 03.14 " DUKA HI	JRI INIIII 48S1:	U 404	